

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or Fax (703) 746-4000

JUL 15 2004

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

21658 7590 04/26/2004

DYKAS, SHAVER & NIPPER, LLP  
 P.O. BOX 877  
 802 WEST BANNOCK STREET, SUITE 405  
 BOISE, ID 83701

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Amber R. Smith (Depositor's name)  
 Amber R. Smith (Signature)  
 July 12, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/010,177	11/13/2001	Melvin A. Zehr	DIAZ114	7766

TITLE OF INVENTION: BEARING SHEAR BLOCK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	07/26/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROSENBAUM, MARK	3725	241-021000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Robert L. Shaver  
 2 Dykas, Shaver & Nipper  
 3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Diamond Z Manufacturing

Caldwell, Idaho

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee  
☐ Advance Order - # of Copies

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Robert L. Shaver (Date)

Reg. No. 42,145 07/12/2004

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

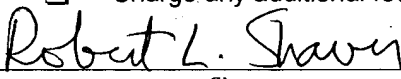
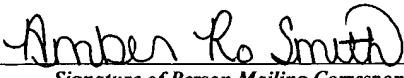
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

07/16/2004 DENMANU2 00000043 10010177

01 FC:2501  
02 FC:1504665.00 OP  
300.00 OP

TRANSMIT THIS FORM WITH FEE(S)

<b>TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity)</b> (37 C.F.R. 1.311)				Docket No. <b>DIAZ114</b>	
Applicant(s): <b>MELVIN ZEHR</b>					
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/010,177	11/13/2001	ROSENBAUM	21,658	3725	7766
Invention: <b>BEARING SHEAR BLOCK</b>					
<b>Mail Stop Issue Fee</b> <b>COMMISSIONER FOR PATENTS</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>					
Transmitted herewith are the following for the above-identified application.					
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85					
<input checked="" type="checkbox"/> Utility Fee: <u>\$ 665.00</u> <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____					
<input checked="" type="checkbox"/> Publication Fee: <u>\$ 300.00</u>					
<input checked="" type="checkbox"/> A check in the amount of <u>\$965.00</u> is attached.					
<input type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. _____ as described below.					
<input type="checkbox"/> Charge the amount of _____					
<input type="checkbox"/> Credit any overpayment.					
<input type="checkbox"/> Charge any additional fee required.					
 _____ <i>Signature</i>			Dated: <b>JULY 12, 2004</b>		
<b>ROBERT L. SHAVER</b> <b>DYKAS, SHAVER &amp; NIPPER, LLP</b> <b>PO BOX 877</b> <b>BOISE, ID 83701-0877</b> <b>208-345-1122</b> <b>REG. NO. 42,145</b>					
cc: <b>CLIENT</b>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p style="text-align: center;"><b>Certificate of Transmission by Facsimile</b> This certificate may only be used if paying by deposit account.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States and Trademark Office (Fax _____) on _____</p> <p style="text-align: center;">Date</p> <hr style="border: 0; border-top: 1px solid black; margin: 10px 0;"/> <p style="text-align: center;">Signature</p> <hr style="border: 0; border-top: 1px solid black; margin: 10px 0;"/> <p style="text-align: center;">Typed or Printed Name of Person Signing Certificate</p> </div> </div> <div style="width: 48%;"> <p style="text-align: center;"><b>Certificate of Mailing by First Class Mail</b></p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>I certify that this document and fee is being deposited on <b>JULY 12, 2004</b> with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.</p> <div style="text-align: center; margin-top: 20px;">             _____            Signature of Person Mailing Correspondence         </div> <div style="text-align: center; margin-top: 10px;"> <b>AMBER R. SMITH</b>            _____            Typed or Printed Name of Person Mailing Correspondence         </div> </div> </div> </div>					